



## Enrollment Action Checklist (**VALUE FIVE**) For **COBRA** Participants

2018 Benefits Open Enrollment Period: May 7 – 25, 2018  
Coverage Effective Date: July 1, 2018

***This is your once-a-year opportunity to enroll or cancel coverage, change plans and add or drop coverage for your eligible spouse and/or dependent children.***

### Have questions about Open Enrollment, COBRA coverage or premiums (rates)?

Contact the State of Delaware Statewide Benefits Office (SBO) at 1-800-489-8933 and ask for Colleen Kondelis.

### What You Need To Know For This Open Enrollment:

- The State of Delaware wants you to take action this May to make sure you are enrolled in the benefit plans that provide the **BEST VALUE** for you and your family! Getting the **BEST VALUE** means reviewing your benefit options (what do the plans offer, what providers are in the plan's network and how much will services cost?) and making informed decisions about what plans are most affordable and aligned with your needs. Making informed decisions regarding your benefit plan selections is an important step to help control rising health care costs and to maintain high quality, affordable options.
- The benefit plan premiums (or rates) for the health, dental and vision plans will not change on July 1, 2018; however, there are a number of health benefit design changes intended to help you obtain the same level of quality and service at reduced costs to you and the State of Delaware. Learn *What's New* by viewing the online mini-videos or visiting an upcoming health fair.

### What You Need To Do (Follow the checklist below):

**Actively participate** in Open Enrollment between **May 7 – 25, 2018** by completing the **VALUE FIVE CALL TO ACTION** steps:

- ☐ 1. **V**isit the Statewide Benefits Office (SBO) website at [de.gov/statewidebenefits](http://de.gov/statewidebenefits) (select "Open Enrollment").
- ☐ 2. **A**ccess the online consumerism resources, including an Interactive Benefits Guide, Mini-Videos and a Health Plan Comparison Chart.
- ☐ 3. **L**ook at your options for health, dental and vision coverage.
- ☐ 4. **U**ppdate/make changes to your health, dental and/or vision coverage if you wish, by submitting your completed application(s) to **State of Delaware Statewide Benefits Office (Attention: Colleen Kondelis) 97 Commerce Way, Suite 201, Dover, DE 19904**.

STATE OF DELAWARE STATEWIDE BENEFITS OFFICE

Phone: (800) 489-8933 • Email: [benefits@state.de.us](mailto:benefits@state.de.us) • Website: [de.gov/statewidebenefits](http://de.gov/statewidebenefits)

**IMPORTANT:**

- ☐ Health, dental and vision forms/applications are located on the SBO website. Please do not send enrollment forms back to SBO if you and/or your Qualified Beneficiaries have not yet made an election of COBRA Continuation Coverage through WageWorks. Changes to your benefits will not be processed unless you or your Qualified Beneficiaries have made a COBRA election. Please contact WageWorks Participant Services at 1-877-864-9546 if you have any questions regarding your COBRA Continuation Coverage status.
- ☐ **If enrolling a dependent child for the first time, you MUST supply additional documentation** (*Dependent: Copy of birth certificate or other legal document*) to SBO. Complete a Dependent Child Coordination of Benefits (DCOB) Form **ONLY** if you are newly enrolling a dependent(s) on your health (Aetna or Highmark Delaware) plan for July 1, 2018 **AND** the dependent(s) have other health coverage. *The DCOB Policy and Form are located on the [SBO website](#).*
- ☐ **If enrolling a spouse for the first time, you MUST supply additional documentation** (*i.e., copy of marriage/civil union certificate*) to SBO.
- ☐ **If enrolling in an HMO plan**, make sure your health or dental provider participates in the plan's network and that they are accepting new patients **before you enroll**. For the Aetna HMO Plan, you are **required** to select a Primary Care Provider (PCP) for you and each covered dependent and for the Dominion National HMO Select Dental Plan you are **required** to select a Primary Care Dentist (PCD) for you and each covered dependent. There are no out-of-network benefits in an HMO plan and you cannot change plans during the plan year if your provider decides to no longer participate in the plan.
- ☐ **5. Enter the online [Spousal Coordination of Benefits \(SCOB\) Form](#) and complete it** (*a new form **MUST** be completed each year during Open Enrollment or your spouse's coverage will be reduced*).

**IMPORTANT:** Complete the SCOB Form only if you cover your spouse on your health plan effective July 1, 2018.

***Other Benefits Available During Open Enrollment:***

- ☐ **To join Blood Bank of Delmarva's *Members For Life* program**, create an account with Blood Bank of Delmarva at <https://donate.bbd.org/> or call 1-888-8-BLOOD-8 to schedule an appointment. Participation is easy. Donate blood at least once a year and allow the Blood Bank to contact you when there is a need for your blood type.